

Lexington Veterans Affairs Medical Center

Pharmacy Residency (PGY1)

Psychiatric Pharmacy Residency (PGY2)

Ambulatory Care Pharmacy Residency (PGY2)

The mission of the Department of Veterans Affairs is “to care of him who shall have borne the battle and for his widow and his orphan.”

The Vision of the Department of Veterans Affairs is to provide Veterans the world-class benefits and services they have earned—and to do so by adhering to the highest standards of compassion, commitment, excellence, professionalism, integrity, accountability, and stewardship.

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About Us

The Lexington Veterans Affairs Medical Center is a fully accredited, two-division, tertiary care medical center with an operating complement of 199 hospital beds. Acute medical, neurological, surgical and psychiatric inpatient services are provided at the Cooper Drive Division, located adjacent to the University of Kentucky Medical Center. Other available services include: emergency care, medical-surgical units, acute psychiatry, ICU, progressive care unit, Cardiac Cath Lab, ambulatory surgery, OR/PACU, hemodialysis, medicine specialty clinics, surgery specialty clinics, and outpatient primary and specialty care.



The Leestown Division (LD), located five miles from Cooper Drive, offers inpatient Post-Traumatic Stress Disorder (PTSD) treatment, nursing home care with an operating bed complement of 60 beds, hospice and respite services, home based primary care, prosthetics and orthotics, geriatrics, optometry, mental health, and substance abuse treatment as well as primary care and women's health. Plans for an inpatient substance abuse treatment program, a teleretinal unit, and a polytrauma unit are underway.

The veteran population in Lexington's primary service area is estimated at more than 92,000. The Lexington VA Medical Center is part of the VA MidSouth Healthcare Network, which consists of six VA medical centers in Kentucky, Tennessee, and West Virginia with community-based outpatient clinics (CBOCs) in those states as well as Arkansas, Mississippi, Virginia, and Indiana.

Currently, the Lexington VA Medical Center operates community-based outpatient clinics (CBOC) in Somerset, Hazard, Morehead and Berea, Kentucky, to provide primary care services to veterans in southern Kentucky and northern Tennessee. The Lexington VA

Medical Center is adjacent to the University of Kentucky Chandler Medical Center and is affiliated with the University of Kentucky College of Pharmacy.

Lexington is located in central Kentucky in the heart of the Bluegrass and is considered the Horse Capital of the World. The area is famous for its beautiful horse farms, racing, bourbon and pastureland. Lexington has a variety of cultural activities and sporting events including college sports, minor league baseball and arena football. The U.S. Census estimated the Lexington-Fayette County population to be ~270,000

Pharmacy Services

The pharmacy service provides 24-hour coverage seven days a week. Patient care is provided by a staff of more than 55 pharmacists, residents, and technicians practicing in the outpatient, inpatient, and ambulatory care settings.

Inpatient Service

The Inpatient Pharmacy Section provides comprehensive pharmaceutical services for all inpatients at both the Cooper Drive and Leestown Divisions through the central pharmacy. Services provided include unit-dose preparation, cart-fill preparation and delivery, intravenous admixture preparation, chemotherapeutic agent preparation, Omnicell refilling and order processing. Clinical services including pharmacokinetic monitoring, medication reconciliation and team rounding are provided.

Ambulatory Care

The Outpatient Pharmacy Sections provide comprehensive pharmaceutical services for clinic patients, which include management of patients in the Primary Care, Anticoagulation, Home Based Primary Care (HBPC), Mental Health, and Neurology clinics. Clinical pharmacists in Primary Care provide chronic disease state management with emphasis in diabetes, hyperlipidemia, and hypertension. Pharmacist-managed group clinics provide patient education and monitoring for chronic diseases, such as hyperlipidemia.

Education and Training

Members of the pharmacy staff precept residents and University of Kentucky clinical pharmacy interns.

Affiliation

The University of Kentucky College of Pharmacy and the UK Chandler Medical Center.

PGY1 Pharmacy Residency

The pharmacy practice residency program is a one-year, full-time residency program accredited by ASHP currently with 3 positions available. Clinical, operational, and educational aspects of pharmacy practice are emphasized during this training experience. Residents will complete rotations including ambulatory care, internal medicine, geriatrics, primary care, and pharmacoeconomics. Other opportunities may be available based on resident interest. Residents will complete and present a primary research project. They will also participate in the UK College of Pharmacy teaching certificate program, which incorporates didactic lecturing, small group/lab facilitation and precepting Doctor of Pharmacy students on clerkship rotations. Continuity clinics are integrated into the program, including pharmacist coordinated clinics, e.g., the anticoagulation and pharmacotherapy clinics.

Required Rotations

Orientation/Hospital Introduction (4-6 weeks)

This orientation provides the resident with an orientation to the hospital and pharmacy service. During this rotation the resident will become familiarized with both the inpatient and outpatient pharmacy services provided by the staff. This includes learning the computer system and how to enter notes, processing prescriptions, checking prescriptions, intravenous admixture preparation, ACLS certification, medication reconciliation, counseling patients, and aspects of formulary management.

Primary Care (6 weeks) - Core

Pharmacy residents are responsible for managing patient health needs based upon provider referrals. Disease states normally encountered include hypertension, diabetes, and hyperlipidemia. These patients are either managed through outpatient Pharmacotherapy clinic appointments or telephone follow-up. Residents evaluate drug regimens for efficacy, adherence, and adverse effects, make appropriate adjustments in the medication regimen, and order necessary laboratory tests. Teaching opportunities include precepting pharmacy students and providing education to patients, caregivers, and staff.

Acute Care/Internal Medicine (6 weeks) - Core

The pharmacy resident on the medicine rotation plays an active role in managing patients admitted to the medicine service. The patient care team consists of an attending physician, medical residents, interns, students, and pharmacy resident. The pharmacy resident provides the team with drug information and patient-specific medication recommendations with the goal of improving patient outcomes. Other activities include participating in daily rounds, monitoring patient medication therapy, reporting adverse drug reactions, pharmacokinetic monitoring and performing medication reconciliations. Teaching opportunities include giving in-services to health care staff and precepting pharmacy students. The resident will also be responsible for completing admission and discharge medication reconciliations on patients.

Geriatrics (8 weeks) – Core

Community Living Center and Home Based Primary Care

The Geriatrics rotation involves managing patients through a variety of settings. This includes conducting Drug Regimen Reviews (DRR) for nursing home (Community Living Center) patients and Home Based Primary Care. Drug regimen reviews are completed every 30 days for each patient, with recommendations sent to the practitioner. The Home Based Primary Care (HBPC) is service provided to veterans that facilitates their care at home rather than in a nursing home environment. The pharmacist is responsible for reviewing every patient enrolled in HBPC every 90 days and providing recommendations to the providers as necessary. The geriatric pharmacists provide comprehensive patient reviews as well as provide targeted management for specific therapies such as anticoagulation therapy and pain management. They also serve as a primary resource for drug information for both CLC staff as well as for the four HBPC locations.

Pharmacoeconomics/Formulary Management (4 weeks)

The pharmacoeconomic and Formulary management experience provides an opportunity to learn the general principles involved in managing a VA hospital pharmacy formulary, utilizing formulary management, and pharmacoeconomics principles. During this rotation, an overall understanding of the VA hospital pharmacy service and the various clinical services provided will be gained. Familiarity with and understanding of the VA Formulary System and the role of National, VISN, and Local P&T committees will be developed. Skills will be taught to use medical literature effectively to provide drug information, develop drug protocols, and for special project presentations.

Understanding the process of performing a medication use evaluation (MUE) to evaluate drug use, provider prescribing patterns, and/or patient drug utilization to determine appropriateness of drug therapy will be gained, as well as an understanding of the principles involved in the electronic formulary management process using medication use evaluation, case management, treatment guidelines/ criteria for use, cost containment initiatives, non-formulary process, and understand the importance of utilizing formulary management and pharmacoeconomics principles in formulary decision making.

Anticoagulation Clinic (4 weeks)

The Anticoagulation Clinic focuses on managing patients taking warfarin for chronic or transient conditions. Management includes patient and family education, warfarin dose titration, and peri-procedure anticoagulation. The main clinic utilizes a point of care device for monitoring; patients who prefer to be monitored closer to home have lab work drawn at community based outpatient clinics and are counseled by telephone. The clinic is responsible for management of ~1400 active patients.

Elective Rotations

Acute Care/ICU (4 weeks)

The 6 South ICU provides care to medical, surgical, and cardiac intensive care patients. The population includes patients that have undergone procedures including but not limited to cardiac catheterization, thoracic, colorectal, and vascular surgeries, and patients with acute conditions such as sepsis, septic and cardiogenic shock, respiratory failure and decompensated heart failure. The pharmacy resident on service is expected to attend

interdisciplinary rounds 6 days a week, provide pharmacotherapy services to patients with critical illnesses, participate as an integral member of the Code 500 team and assist with post-surgical care. The resident on service is also expected to assist in precepting any pharmacy students on rotation to provide optimal patient care.

Psychiatry, Inpatient (4 weeks)

In the psychiatric rotation, residents are active members of a multidisciplinary team consisting of psychiatrists, psychologists, social workers, nurses, and students. Residents are integral in implementation of drug therapy, drug monitoring, providing drug information to the staff, and educating the patients. The psychiatry rotation is designed to allow the resident to provide evidence-based, patient-centered medication therapy management with the psychiatry team. The resident is exposed to inpatient mental health patients with diagnoses including depression, anxiety and PTSD, schizophrenia and other psychotic disorders, bipolar disorder, sleep disorders, and substance abuse. The resident will participate in patient care rounds with the inpatient team in psychiatry Monday through Friday and perform medication reconciliation on patients admitted and discharged from the psychiatry unit. The resident will also gain experience in precepting fourth year pharmacy students and PGY1 residents as they rotate through the inpatient psychiatry unit throughout the year. Exceptions to these schedules may be made for on-going clinical activities or occasional administrative activities. The resident will participate in disease state discussions, patient-centered discussions, and journal clubs scheduled throughout the month. The resident will also present during one clinical conference.

Off-Site Electives

These opportunities are coordinated with the University of Kentucky Medical Center and may be subject to availability of clinical preceptors. Residents will be required to have Kentucky licensure and current ACLS provider certification for these rotations. Residents may also repeat VA experiences as an elective as time and schedules permit.

Required Longitudinal Rotations

Drug Information

This longitudinal rotation will be in conjunction with the resident's primary care rotations. Residents will evaluate drug information questions submitted by the primary care providers via electronic consult. By utilizing primary literature, clinical guidelines and professional judgment, the resident will develop a response to the question, including recommendations on plan of treatment and appropriate follow-up. The resident will discuss drug information responses with the assigned primary care clinical pharmacist, and recommendations will be provided to the consulting primary care provider for review.

Management/Administration

These monthly meetings will be lead by the Chief of Pharmacy and will discuss topics related to pharmacy ethics, personnel issues, finance, pharmacy management, VA specific topics, formularies, and organizational structures and committees.

Neurology Clinic

The resident will attend neurology pharmacotherapy clinic one half day weekly. The neurology rotation is designed to allow the resident to provide evidence-based, patient-centered medication therapy management in a pharmacist-managed clinic. The resident is exposed to ambulatory adult neurological conditions with emphasis on stroke, Parkinson's disease, epilepsy, and dementia. Patient-care responsibilities will include the following: monitoring and adjusting drug therapy regimens; medication reconciliation; and providing drug information and therapeutic recommendations to the neurology service. Disease state and patient-centered discussions occur throughout the experience.

Mental Health Pharmacotherapy Clinic

The mental health pharmacotherapy clinic is designed to help monitor and adjust medication therapies for veterans with mental health disorders. VA psychiatrists refer patients requiring mental health drug therapy adjustment to this pharmacist run clinic. A variety of patient conditions are managed through this clinic, including depression, anxiety, schizophrenia, bipolar disorder, PTSD, and others.

Residential Psych (PTSD/Substance abuse) - Elective

This psychiatric rotation is designed to allow the resident to provide evidence-based, patient-centered psychiatric medication therapy management in a residential care unit. The resident will attend Residential Psychiatric pharmacotherapy group education on Tuesdays and/or Thursday afternoons. The resident will be exposed to adult psychiatric conditions with emphasis on PTSD and substance abuse. Patient-care responsibilities will include the following: provision of all 4 of the group medication education lectures to both of the units, monitoring and adjusting drug therapy regimens to selected patients over the longitudinal time frame; medication reconciliation; and providing drug information and therapeutic recommendations to the residential psychiatric services (PTSD and Substance Abuse). Journal club, disease state and patient-centered discussions occur throughout the experience.

Staffing

The primary responsibility of the resident is to provide staffing in the outpatient pharmacy on Saturday and provide pharmacokinetic monitoring, warfarin monitoring, and conduct medication reconciliation reviews on Sunday. Other possible responsibilities include providing patient education and drug information, along with review formulary drug consults for inpatients and patient being discharged. The staffing component will alternate with the weekend ICU rounding component. Residents will also staff from 4:30-8:30 one night per week in the inpatient pharmacy in order to become proficient in the acute care pharmacy area.

Experiential Requirements

Research Project

Role as Chief Resident

Scholarship of Teaching and Learning Certificate

PPS Seminar Series

Medication Use Evaluation (MUE)

Clinical Conference

Case Presentations

Journal Club Presentations

P&T Recorder

Student Preceptor

Newsletter Articles

In-service Presentations for Pharmacy and Medical Staff

PGY2 Psychiatric Pharmacy Residency

The VHA provides comprehensive mental health services to adult veterans. Approximately 39% of veterans are 65 years of age or older, while female veterans, increasing in number, represent approximately 8% of the US veteran population.* While many neuropsychiatric disorders are present in the population, the resident can expect the training emphasis to occur with veterans with schizophrenia, mood disorders, PTSD and other anxiety disorders, substance abuse/dependence, dementia, traumatic brain injury, Parkinson's disease, and other neurological disorders.

The psychiatric specialty residency program is a one-year, full-time residency program accredited by ASHP with 1 position available. Clinical, operational, and educational aspects of pharmacy practice are emphasized during this training experience. Residents will complete and present a primary research project. They will also perform teaching at the UK College of Pharmacy and precept Pharm.D. students on clerkship rotations.

The main focus of this second-year specialty resident will be in the areas of psychiatric and neurologic conditions. This will be accomplished by completing both required and elective rotations in both inpatient and outpatient psychiatric settings along with neurology rotations in those same types of settings.

The following is a description of the learning experiences for the resident:

Required

Adult Inpatient Psychiatry

Preceptor- Anna Lockwood, Pharm.D., BCPP

Minimum 3 month rotation (months may be divided if needed)

Dr. Lockwood is the clinical pharmacy specialist on the inpatient psychiatry team. She performs medication reconciliation upon admission and discharge and provides therapeutic recommendations regarding selection of therapy, drug interactions, therapeutic drug monitoring and drug information to the inpatient psychiatric team.

Ambulatory Psychiatry

Preceptor- Courtney Eatmon, Pharm.D., BCPP

Longitudinal Clinic- ½ day per week all year

Dr. Eatmon manages the outpatient mental health pharmacotherapy clinics. Her patient-care responsibilities include: assessing, monitoring and adjusting drug therapy regimens for outpatient mental health patients; laboratory monitoring; assessing adherence to drug therapy; and providing drug information to patients and families.

Residential Psych (PTSD/Substance abuse)

Preceptor- Terry German, Pharm.D.

Dr. German provides pharmacotherapy management and medication reconciliation for patients admitted and discharged from the PTSD/Substance Abuse Residential Care Units.

Patient-care responsibilities will include the following: provision of all 4 of the group medication education lectures to both of the units, monitoring and adjusting drug therapy regimens to selected patients over the longitudinal time frame; medication reconciliation; and providing drug information and therapeutic recommendations to the residential psychiatric services.

Selected

Neurology

Preceptor- Melody Ryan, Pharm.D., BCPS

Inpatient Acute- 1 month

Dr. Ryan provides pharmacy consult services to the inpatient neurology team and manages the outpatient neurology pharmacotherapy clinic. Her patient-care responsibilities include: monitoring and adjusting drug therapy regimens; screening patients seen in clinic to assure compliance with drug therapy; providing drug information and therapeutic recommendations to the neurology service and adjusts medical devices (i.e., deep brain stimulators). The neurology inpatient experience is designed to allow the resident to provide evidence-based, patient-centered medication therapy management for a neurology acute care team, including rounding with the service, conducting medication reconciliation and patient counseling. Residents will assist with hospital wide pharmacokinetic monitoring, ADE screening and other pharmacy specific projects as assigned. Common neurological disease states to which the resident will be exposed and gain proficiency in treatment include, but are not limited to, the following: dementia, epilepsy, headaches, multiple sclerosis, Parkinson's disease, and stroke. The resident will participate in patient care rounds with the in-patient neurology team Monday through Friday.

Longitudinal Clinic- ½ day per week x 3 months

The neurology ambulatory care experience is designed to allow the PGY-2 psychiatric pharmacy resident to provide evidence-based, patient-centered medication therapy management in a pharmacist-managed clinic. The resident is exposed to ambulatory adult neurological conditions with emphasis on stroke, Parkinson's disease, epilepsy, and dementia. This is a longitudinal experience, occurring once weekly at neurology pharmacotherapy clinic on Thursday afternoons. Exceptions to these schedules may be made for on-going clinical activities or occasional administrative activities. The resident will participate in disease state discussions, patient-centered discussions, and journal clubs scheduled throughout the rotation. The resident will attend neurology grand rounds and clinical conference. The resident will also present during one clinical conference.

Extended Care

Preceptor- Teresa (Terry) German, Pharm.D.

Longitudinal

The resident will interact with both veterans and the mental health care teams for PTSD and Substance abuse/dependence residential treatment programs. The pharmacy resident will provide medication education to patients and staff, participate in family education programs, and assess program medication use patterns.

Elective Experiences

Consult and Liaison Psychiatry

Preceptor- Anna Lockwood, Pharm.D., BCPP; Getulio Tovar, MD

Description- The C&L service is run by Dr. Tovar, Chief of Mental Health Services. Dr. Lockwood serves as the rotation preceptor and reviews cases with the resident and provides the overall evaluation with feedback from psychiatry.

Geriatrics

Preceptor- Jill Johnson, Pharm.D., BCPS

Minimum Two Month Experience- may extend

Description-

Dr. Johnson's patient-care responsibilities include: performing and overseeing the performance of scheduled Drug Regimen Reviews of Community Living Center (long-term care) patients and Home Based Primary Care patients; communicating with providers (physicians, nurse practitioners, nurses) regarding pharmacotherapy changes/recommendations for patients; participating in multiple teams/committees including: Hospice/Palliative Care Consult Team, HBPC Interdisciplinary Treatment Team, Falls Aggregate Committee.

Mental Health Research

Opportunities for the required research project or an additional experience exists in medication outcomes in both VA and public mental health systems in Kentucky.

Other

Formulary Management and Pharmacoeconomics

Preceptor: TJ Emmons, Pharm.D.

Longitudinal

The formulary consult service uses the principles of formulary management to determine the appropriateness of drug therapy and provide the patient with the best therapeutic and cost effective drug therapy. The consult service also assists with drug information questions and implementation of VA therapeutic guidelines.

Dr. Emmons manages the formulary consult service and is also a member of the VA Patient Safety, Clearing House, Medical Records, and Medication Aggregate committees.

Pharmacy Services Orientation and Staffing

Preceptor- Matthew Lane, Pharm.D., BCPS

Medication Reconciliation

Preceptor- Medication Reconciliations Pharmacists

This staffing component consists of conducting admission and discharge medication reconciliation reviews on every 3rd Sunday of the month. Other possible responsibilities include providing pt education and drug information, along with review formulary drug consults for inpatients and patient being discharged.

Off-Site Electives

These opportunities are coordinated with the University of Kentucky Medical Center and may be subject to availability of clinical preceptors. University of Kentucky residents have preference to experiences there and the VA residents' ability to complete one at UK may be affected by this.

Residents may also repeat an earlier experience as an elective considering that time permits and the resident has all other required rotations scheduled.

Non-Experiential Requirements

Research Project

Scholarship of Teaching and Learning Certificate Program

Medication Use Evaluation (MUE)

Case Presentations)

Journal Club Presentations)

P&T Minutes Recorder

Student Preceptor

Newsletter Articles

PGY2 Ambulatory Care Pharmacy Residency

The ambulatory care residency is a second year specialty residency that includes training in a variety of pharmacist-managed and multidisciplinary clinic settings at both the Lexington VA Medical Center and the University of Kentucky Medical Center. This residency program will allow the resident to achieve a thorough understanding of the role of a clinical pharmacist in both a VA and university based clinic setting and to develop the clinical practice skills necessary to develop a successful pharmacist-managed clinic in either venue. Over the course of the year, the resident will develop skills in conducting patient interviews, performing necessary physical assessment, designing patient-centered medication regimens, developing evidence-based monitoring plans, providing patient education, and communicating appropriate drug information to both patients and health care providers. The primary emphasis of this residency is placed on the development of clinical practice skills that can be applied to pharmacist-managed or multidisciplinary team approaches to patient care, as well as the development and refinement of teaching skills and scholarly activity.

The ambulatory care resident will rotate through the following multidisciplinary or pharmacist-managed clinics:

VA Core Clinic Experiences

Primary Care/Pharmacotherapy Clinic

Preceptors: Jamie Knight, Pharm.D., BCPS, Jami Bailey, Pharm.D., BCPS, Jake Funk, Pharm.D., BCPS, Patrick Higginbotham, Pharm.D., BCPS

Pharmacotherapy Clinic is a consult-based, disease and medication management clinic offering scheduled appointments, telephone follow-ups, and drug information responses. The resident will rotate to various clinic sites to experience practice differences unique to each pharmacy specialist and primary care team. The resident will be given more responsibility for direct patient care, progressively increasing toward independence at a pace determined by both the resident and preceptors. Over the course of the year, the resident will develop skills in establishing collaborative professional relationships and partnerships with patients, conducting necessary physical assessment, providing patient education, and communicating appropriate drug information to both patients and physicians. The resident will provide efficient, effective, evidence-based, patient-centered treatment for chronic illnesses, with emphasis on diabetes, hyperlipidemia, and hypertension. Teaching opportunities include precepting pharmacy students and providing education to patients, caregivers, and staff.

Cholesterol Management Clinic

Preceptors: Jami Bailey, Pharm.D., BCPS

Cholesterol Management Clinic is a multidisciplinary clinic consisting of a clinical pharmacist, dietitian, RN, and LPN. This experience is designed to allow the PGY2

ambulatory care pharmacy resident to provide evidence-based, patient-centered medication therapy management in a unique multidisciplinary clinic setting. The resident will have the opportunity to refine skills in the management of dyslipidemia. He or she will collaborate with other health care providers to optimize drug therapy, provide education, and promote adherence to medications as well as lifestyle modifications. This is a longitudinal experience, occurring once weekly over the course of two or three months. The more experienced PGY2 resident will be able to assume patient management duties more swiftly than the PGY1 resident and will also be expected to answer cholesterol clinic consults and take on administrative clinic responsibilities as assigned.

Home Based Primary Care

Preceptor: Lisa Strunk, Pharm.D., BCPS

Home Based Primary Care (HBPC) is a multidisciplinary primary care team designed to see homebound patients in their homes. The Lexington VA HBPC team consists of Social Workers, Dietician, ARNPs, RNs, LPN, Physical Therapist, Pharmacist, Psychologist, and Program Support Assistants, and is overseen by a Program Director and a Medical Director. Many VA Medical Centers have an HBPC team and, although the disciplines represented may vary, the goals remain the same: to help patients remain in their homes by maximizing function, minimizing hospitalizations, and maintaining quality of life. HBPC offers a unique experience for the PGY2 pharmacy resident. It provides the opportunity to evaluate the patient's medication regimen and make pharmacotherapy recommendations in a multidisciplinary team setting with a potential for visiting the patient in his or her home where he/she is more comfortable, to meet caregivers, to evaluate the environment, to review medications comprehensively, and to evaluate medication storage conditions.

Neurology Clinic

Preceptor: Melody Ryan, Pharm.D., BCPS

The neurology ambulatory care experience is designed to allow the PGY2 ambulatory care pharmacy resident to provide evidence-based, patient-centered medication therapy management in a pharmacist-managed clinic. The resident is exposed to ambulatory adult neurological conditions with emphasis on stroke, Parkinson's disease, epilepsy, and dementia. This is a longitudinal experience, occurring once weekly at neurology pharmacotherapy clinic on Thursday afternoons. The resident will participate in disease state discussions, patient-centered discussions, and journal clubs scheduled throughout the rotation.

Mental Health Clinic

Preceptor: Courtney Eatmon, Pharm.D., BCPP and Anna Lockwood, Pharm.D, BCPP

The mental health pharmacotherapy clinic is designed to help monitor and adjust medication therapies for veterans with mental health disorders. VA psychiatrists refer patients requiring mental health drug therapy adjustment to this pharmacist run clinic. A variety of patient conditions are managed through this clinic, including depression, anxiety, schizophrenia, bipolar disorder, PTSD, and others.

Anticoagulation Clinic

Preceptor: Sandra Senft, Pharm.D., PT, MPA

The Anticoagulation Clinic focuses on managing patients taking warfarin for chronic or transient conditions. Management includes patient and family education, warfarin dose titration, and peri-procedure anticoagulation. The main clinic utilizes a point of care device for monitoring; patients who prefer to be monitored closer to home have lab work done at community based outpatient clinics and are counseled by telephone.

University of Kentucky Core Clinic Experiences:

Women's Health Clinic

Preceptor: Aimee Adams, Pharm.D.

The goal of this rotation is to allow the resident the opportunity to develop skills in providing pharmaceutical care to ambulatory patients and to acquire an understanding of the pharmacist's role on an outpatient medicine team focusing on women's health care issues. In this clinic, the resident will interact with a variety of health care practitioners including internal medicine attendings, residents, medical students, nurse practitioners, nurses, and medical assistants. The resident will develop skills in obtaining medication histories, necessary physical assessment, assessing the appropriateness of medication regimens, patient counseling and monitoring, and providing appropriate drug information to both patients and other health care professionals.

Anticoagulation Clinic

Preceptor: Aimee Adams, Pharm.D.

Anticoagulation and antithrombotic therapy is a mainstay in ambulatory care pharmacy practice. It is inherent upon the resident to learn all aspects of anticoagulation therapy, and several different practice models. The Anticoagulation Clinic at the Gill Heart Institute is in operation 4 days/week and sees between 20-25 patients per half-day. The VA resident will attend the UK Anticoagulation Clinic on days as specified by the resident schedule.

Elective UK Clinic Rotation Experiences

Infectious Disease, Cardiology, Emergency Medicine, Hematology/Oncology, Sleep Disorders, Bone Marrow Transplant, Solid Organ Transplant, Pharmacoeconomics/Epidemiology

Other Requirements

Research project

Scholarship of Teaching and Learning Certificate Program

Precept clerkship students

Didactic and case-based teaching

Disease state discussions

Journal club presentations

In-services for health care providers

Medication use evaluation (MUE)

Staffing experience (VA Outpatient Pharmacy)

Scholarship of Teaching and Learning Certificate

The Scholarship of Teaching and Learning Certificate Program (STLC) is a program that is designed for residents to participate in to further develop/enhance their teaching skills for future academic positions. Upon completion of the program, a certificate of completion will be awarded. The following link provides more information about the program:
<http://pharmacy.mc.uky.edu/programs/residency/stlcp.php>

Many graduates of the pharmacy residency programs seek careers in academia or have strong interests in academic positions. Through the University of Kentucky, Veteran Affairs Pharmacy Residents are able to participate in multiple teaching opportunities including lecture experiences, laboratory assistance, small group facilitation, elective rotations, faculty development seminars, and clinical rotation teaching.

The certificate program was developed to introduce participants to academic literature, contemporary pharmacy/health professions education, teaching styles, and philosophies. The primary philosophy of the program is built upon the Carnegies Foundation's work on teaching as scholarship. Through attendance at and participation in seminars, documentation of formal teaching experiences (e.g., didactic presentations, laboratory facilitation, clinical teaching), and development of a teaching portfolio, participants can document their participation and experience while earning a certificate of completion. Participants will receive handouts, bibliographies, and web site information to encourage future learning and development.

The goal of this program is to provide a forum for program participants to gain knowledge of contemporary health professions and pharmacy education issues and to demonstrate experience and accomplishment in these areas.

Originally developed as an on-campus course, the Scholarship of Teaching and Learning Certificate (STLC) program has been expanded via teleconference technology to residency sites across Kentucky and Ohio. The Scholarship of Teaching and Learning Certificate Program was recognized as a 2004 winner.

Program Information

Residency Program Information

Duration: 12 months

Number of PGY1 positions: 3

Number of PGY2 positions: 2

Application Deadline: December 30

Starting Date: July 1st

Estimated Stipend: \$41,000 (PGY1)

\$44,500 (PGY2)

Interview Required: Yes

Benefits:

Health Insurance

ACLS Certification

Thirteen (13) vacations days

4 hours of vacation earned per pay period, total 13 days

Eleven (11) federal holidays

Thirteen (13) sick days

4 hours of sick leave earned per pay period, total 13 days

Administrative time for professional meetings

ASHP Mid-Year (Early December)

Great Lakes Residency Conference (Mid-Late April)

CPNP Annual Conference (Psych PGY2, April)

Free Photocopying

Medical Media Support

For printing of poster for ASHP Mid-Year Meeting

Part-time Faculty Appointment to University of Kentucky

Unlimited access to journals and other reference material through UK

Special Requirements for Acceptance

Pharmacy Licensure or Eligibility for Licensure

Doctor of Pharmacy or Equivalent Experience

United States Citizenship

Letter of Interest

College Transcripts

Curriculum Vitae

Three (3) letters of recommendation

Program Preceptors

Matthew Lane, Pharm.D., BCPS

Dr. Lane received his BS in pharmacy from the University of Kansas and his Pharm.D. from the University of Kentucky. Subsequently he completed a pharmacy practice and critical care residency at the University of Kentucky. Dr. Lane is board certified in pharmacotherapy. His clinical practice areas are surgery, infectious disease, and critical care. He is the clinical coordinator of pharmacy service and assistant professor at the University of Kentucky College of Pharmacy. Dr. Lane is also the PGY1 Pharmacy Residency program director.

Jill Johnson, Pharm.D., MHA, BCPS

Dr. Johnson received her Pharm.D. from the University of Tennessee College of Pharmacy and completed a Pharmacy Practice Pharmacy Residency with Emphasis in Geriatrics at the Veterans Affairs Medical Center in Memphis, Tennessee. She obtained Master of Health Administration from University of Kentucky Martin School of Public Policy and Administration. Dr. Johnson is a Clinical Pharmacy Specialist in Geriatrics here at the Lexington VAMC. Her roles at the VA include providing clinical pharmacy services to veterans in the Community Living Center, and providing pain and symptom management services to Hospice and Palliative Care patients as a member of the Palliative Care Consult Team. She is also an Assistant Professor at the University of Kentucky College of Pharmacy.

Melody Ryan, Pharm.D., MPH, BCPS, CGP

Dr. Ryan received both her BS and Pharm.D. degrees from the University of Kentucky. She completed a pharmacy practice residency at Duke University Medical Center and a two year fellowship in Neuroscience at the University of Kentucky. Dr. Ryan is a certified geriatric pharmacotherapist and is board certified in pharmacotherapy. Dr. Ryan also completed a Master's in Public Health. Dr. Ryan coordinates pharmaceutical care for the Neurology Service. Dr. Ryan is an associate professor with tenure at the University of Kentucky College of Pharmacy.

Jamie Knight, Pharm.D., BCPS

Dr. Knight received her Pharm.D. from the University of Kentucky. She completed a pharmacy practice residency here at the Lexington VAMC. Dr. Knight is board certified in pharmacotherapy. She is a Clinical Pharmacy Specialist and coordinates pharmaceutical care services for the Primary Care Clinic. Her clinical practice focuses on chronic disease state management with emphasis on diabetes, hyperlipidemia, and hypertension. Dr. Knight is also the PGY2 Ambulatory Care Pharmacy Residency program director.

Anna Lockwood, Pharm.D., BCPP

Dr. Lockwood received her Pharm.D. from the University of Tennessee, Memphis. She completed a pharmacy practice residency and a psychiatry specialty residency here at the Lexington VAMC. Dr. Lockwood is board certified in psychiatric pharmacotherapy and is a Clinical Pharmacy Specialist in inpatient psychiatry. She provides anticoagulation monitoring and medication reconciliation for patients admitted and discharged from the psychiatric unit.

Sandra L. Senft, Pharm.D., PT, MPA

Dr. Senft received her PharmD – MPA in the dual degree program at UK COP, and completed her PGY1 residency at the Lexington VAMC. She is a Clinical Pharmacy Specialist in the Anticoagulation Clinic and coordinates the pharmaceutical care services for the Clinic.

Jacob Funk, Pharm.D., BCPS

Dr. Funk received his Pharm.D. from the University of Kansas. He completed a pharmacy practice residency in 2006 at the VAMC in Memphis, TN. Dr. Funk is board certified in pharmacotherapy. Dr. Funk is a Clinical Pharmacy Specialist in our ambulatory/primary care clinics.

Medication Reconciliation Pharmacists

Dr. Karen Boyle received her Pharm.D. from the Virginia Commonwealth. Dr. Rachael Mathews received her Pharm.D. from the University of Kentucky. Dr. Rodney Haddix received his Pharm.D. from the University of Kentucky. Lindsey Dodds received her Pharm.D. from the University of Kentucky. Dr. Rachel Hanners received her Pharm.D. from East Tennessee State University and completed a PGY1 residency at the James H. Quillen VA Medical Center.

Lisa Strunk, Pharm.D., BCPS, CGP

Dr. Strunk received her Pharm.D. from the University of Kentucky. She completed a pharmacy practice residency at the Lexington VAMC and is now a Clinical Pharmacy Specialist working with patients enrolled in VA's Home-Based Primary Care (HBPC) program. She is board certified in pharmacotherapy.

Jami Bailey, Pharm.D., BCPS

Dr. Bailey received her Pharm.D. from the University of Maryland, Baltimore in 2005. She completed a pharmacy practice residency here at the Lexington VAMC. Dr. Bailey is board certified in pharmacotherapy and provides clinical pharmacy services in our Home Based Primary Care Program.

Teresa (Terry) German, Pharm.D.

Dr. German received her Pharm.D. from the University of Nebraska Medical Center, College of Pharmacy. She initiated the clinical pharmacy program at the Lexington VAMC in 1991, and established the pharmacy practice residency program in the mid 90's. Dr. German initiated several clinical pharmacy programs including the Warfarin Clinic, Primary Care pharmacotherapy management, and residential psychiatry. She currently provides pharmacotherapy management and medication reconciliation for patients admitted and discharged from the PTSD/Substance Abuse Residential Care Units and provides anticoagulation management in the Warfarin clinic.

Tara Downs, PharmD, BCACP

Dr. Downs received her Pharm.D. from the University of Kentucky. She completed a PGY1 residency at the TVHS VA Medical Center, and her PGY2 ambulatory care residency at the Lexington VAMC.

Kelly Walsh, Pharm.D., BCPS

Dr. Walsh received her Pharm.D. from the University of Southern Nevada College of Pharmacy. She completed a PGY1 and a PGY2 specialty residency in internal medicine at the University of Kentucky Medical Center. She also earned B.S. degree in Biology with a minor in English from Fairfield University in Fairfield, Connecticut and a Master of Science in Teaching. She was a science teacher for middle/high school aged children for 6 years prior to pursuing pharmacy training. She now practices as a clinical specialist in acute care.

Courtney Eatmon, Pharm.D., BCPP

Dr. Eatmon received her Pharm.D. from the University of Kentucky College of Pharmacy. She completed a Psychiatric Pharmacy Residency at the Lexington VAMC. Dr. Eatmon is board certified in psychiatric pharmacotherapy and provides clinical pharmacy services in the outpatient psychiatric clinics.

John (TJ) Emmons, Pharm.D.

Dr. Emmons received his Pharm.D. from the Samford University McWhorter School of Pharmacy. He completed a pharmacy practice residency at the Lexington VAMC. Dr. Emmons serves as the program manager for formulary management.

Jenna Houranieh, Pharm.D.

Dr. Houranieh received her Pharm.D. from the Massachusetts College of Pharmacy. She completed her PGY1 and PYG2 oncology residencies at the Southern Arizona VA Healthcare System. Dr. Houranieh practices as a clinical specialist in oncology.

Leslie Megan Brown, Pharm.D, BCPS

Dr. Brown received her Pharm.D. from the University of Tennessee. She completed her PGY1 residency through the U.S. Public Health Service stationed at Tahlequah, Ok. Dr. Brown is a clinical specialist in primary care.